

18351 U.S.PTO  
100203**UTILITY PATENT APPLICATION TRANSMITTAL**

(New Nonprovisional Applications Under 37 CFR § 1.53(b))

Attorney Docket No:

SANDP040

22278 U.S.PTO  
10/678893

100203

**TO THE ASSISTANT COMMISSIONER FOR PATENTS:**

Transmitted herewith is the patent application of ( ) application identifier or (X) first named inventor, Robert C. Chang, entitled HYBRID IMPLEMENTATION FOR ERROR CORRECTION CODES WITHIN A NON-VOLATILE MEMORY SYSTEM, for a(n):

Original Patent Application.

Continuing Application (prior application not abandoned):

Continuation     Divisional     Continuation-in-part (CIP)  
of prior Application No. \_\_\_\_\_, filed \_\_\_\_\_.

Please insert (or replace the previous claim of priority) after the title of the application "This is a

Continuation     Divisional     Continuation-in-part (CIP)  
of Application No. \_\_\_\_\_, filed \_\_\_\_\_, which is hereby incorporated by reference."

This application claims the benefit of U.S. Provisional Application  
No. 60/421,911, filed October 28, 2002.

Enclosed are:

- |  |   |
|--|---|
| <input checked="" type="checkbox"/> Specification; <u>35</u> Total Pages.  | <input checked="" type="checkbox"/> Drawing(s); <u>10</u> Total Sheets.                           |
| <input checked="" type="checkbox"/> Oath or Declaration:   |   |
| <input checked="" type="checkbox"/> A Newly Executed Combined Declaration and Power of Attorney:                               |   |
| <input checked="" type="checkbox"/> Signed.  | <input type="checkbox"/> Unsigned. <input type="checkbox"/> Partially Signed.                     |
| <input type="checkbox"/> A Copy from a Prior Application for Continuation/Divisional (37 CFR § 1.63(d)).                       |   |
| <input type="checkbox"/> Signed Statement Deleting Inventor(s) Named in the Prior Application. (37 CFR § 163(d)(2)).           |   |
| <input type="checkbox"/> Power of Attorney.  | <input checked="" type="checkbox"/> Return Receipt Postcard.                                      |
| <input type="checkbox"/> Associate Power of Attorney.  | <input checked="" type="checkbox"/> A Check in the amount of <u>\$1604.00</u> for the Filing Fee. |
| <input checked="" type="checkbox"/> Preliminary Amendment.   | <input type="checkbox"/> Information Disclosure Statement and Form PTO-1449.                      |
| <input type="checkbox"/> A Duplicate Copy of this Form for Processing Fee Against Deposit Account.                             |   |
| <input type="checkbox"/> A Certified Copy of Priority Documents (if foreign priority is claimed).                              |   |
| <input checked="" type="checkbox"/> Assignment and Assignment Recordation Cover Sheet  |   |
| <input type="checkbox"/> Statement(s) of Status as a Small Entity.   |   |
| <input type="checkbox"/> Statement(s) of Status as a Small Entity Filed in Prior Application, Status Still Proper and Desired. |   |
| <input checked="" type="checkbox"/> Other: <u>Application Data Sheet</u>   |   |

CLAIMS AS FILED				
FOR	NO. FILED	NO. EXTRA	RATE	FEE
Total Claims	45	25	\$18.00	\$ 450.00
Independent Claims	7	4	\$86.00	\$ 344.00
Assignment Recording Fee				\$40.00
Basic Filing Fee				\$770.00
Total Filing Fee				\$1,604.00

At any time during the pendency of this application, please charge any fees required or credit any overpayment to Deposit Account No. 50-1652 (Order No. SANDP040).

Respectfully submitted,

By: Peggy A. Su  
Peggy A. Su, Reg. No. 41,336

Date: October 2, 2003

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I hereby certify that this is being deposited with the U.S. Postal Service "Express Mail Post Office to Addressee" service under 37 CFR § 1.10 on the date indicated below and is addressed to:

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